

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Fightin' Ninth Political Action Committee

ADDRESS (number and street)

PO Box 71596

☐ Check if different than previously reported. (ACC)

Richmond

VA

23255-1596

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00520841

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

07

01

2015

12

31

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John G. Selph

Signature of Treasurer

John G. Selph

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

01

28

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fightin' Ninth Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

|                                                                                                                                                                               | COLUMN A<br>This Period                                              | COLUMN B<br>Calendar Year-to-Date                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br><span style="border: 1px solid black; padding: 2px;">2015</span> |                                                                      | <span style="border: 1px solid black; padding: 2px;">13083.33</span> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                                                                                     | <span style="border: 1px solid black; padding: 2px;">9480.49</span>  |                                                                      |
| (c) Total Receipts (from Line 19) .....                                                                                                                                       | <span style="border: 1px solid black; padding: 2px;">25500.00</span> | <span style="border: 1px solid black; padding: 2px;">30500.00</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....                                                                           | <span style="border: 1px solid black; padding: 2px;">34980.49</span> | <span style="border: 1px solid black; padding: 2px;">43583.33</span> |
| 7. Total Disbursements (from Line 31) .....                                                                                                                                   | <span style="border: 1px solid black; padding: 2px;">21388.41</span> | <span style="border: 1px solid black; padding: 2px;">29991.25</span> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                                                                                     | <span style="border: 1px solid black; padding: 2px;">13592.08</span> | <span style="border: 1px solid black; padding: 2px;">13592.08</span> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                               | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |                                                                      |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                                              | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |                                                                      |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fightin' Ninth Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2015

To:

M M / D D / Y Y Y Y Y  
12 31 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

0.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

25500.00

30500.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

25500.00

30500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

25500.00

30500.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

25500.00

30500.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....                                                 | 2388.41                       | 5991.25                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 2388.41                       | 5991.25                           |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 15000.00                      | 20000.00                          |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                             | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....                                                                  | 4000.00                       | 4000.00                           |
| 30. Federal Election Activity (2 U.S.C. §431(20))                                              |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 21388.41                      | 29991.25                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 21388.41                      | 29991.25                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 25500.00                      | 30500.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 25500.00                      | 30500.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 2388.41                       | 5991.25                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 2388.41                       | 5991.25                           |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 12

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Fightin' Ninth Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. ALPHA NATURAL RESOURCES, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1301 PENNSYLVANIA AVE., NW  
 SUITE 404

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00348524

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07 / 31 / 2015**

**Transaction ID : SA11C.4295**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)**

Mailing Address 101 CONSTITUTION AVE, NW  
 SUITE 400W

City State Zip Code  
 WASHINGTON DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00089136

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09 / 04 / 2015**

**Transaction ID : SA11C.4299**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)**

Mailing Address 1445 NEW YORK AVENUE NW  
 STE 800

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00359539

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**08 / 24 / 2015**

**Transaction ID : SA11C.4298**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

12500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 12

(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Fightin' Ninth Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)**

Mailing Address 655 BEACH STREET

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| SAN FRANCISCO | CA    | 94109    |

FEC ID number of contributing federal political committee.

**C** C00196246

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 17 / 2015

Transaction ID : SA11C.4306

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

Mailing Address 100 DAINGERFIELD ROAD

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| ALEXANDRIA | VA    | 22314    |

FEC ID number of contributing federal political committee.

**C** C00030809

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2015

Transaction ID : SA11C.4296

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

Mailing Address 100 DAINGERFIELD ROAD

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| ALEXANDRIA | VA    | 22314    |

FEC ID number of contributing federal political committee.

**C** C00030809

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 15 / 2015

Transaction ID : SA11C.4308

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

7500.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 12

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Fightin' Ninth Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address ONE CONSTITUTION AVE NE

City State Zip Code  
 WASHINGTON DC 20002

FEC ID number of contributing  
federal political committee.

**C** C00009282

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**09 / 30 / 2015**

**Transaction ID : SA11C.4301**

Amount of Each Receipt this Period

2500.00

## **B. PROFESSIONAL COMPOUNDING CENTERS OF AMERICA POLITICAL ACTION COMMITTEE PCCA PAC**

Mailing Address 9901 SOUTH WILCREST DRIVE

City State Zip Code  
 HOUSTON TX 77099

FEC ID number of contributing  
federal political committee.

**C** C00558452

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

**07 / 20 / 2015**

**Transaction ID : SA11C.4292**

Amount of Each Receipt this Period

3000.00

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00

25500.00





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27             | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Fightin' Ninth Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Primland**

Mailing Address 2000 Busted Rock Rd

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| Meadows of Dan | VA    | 24120    |

Purpose of Disbursement  
catering and lodging for fundraising event

Candidate Name

003

Category/  
Type

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 17    |   | 2015        |

**Transaction ID : SB21B.4300**

Amount of Each Disbursement this Period

1722.39

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

Category/  
Type

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Candidate Name

Category/  
Type

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1722.39

2363.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Fightin' Ninth Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
contribution

Candidate Name

010

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 25    | / | 2015        |

**Transaction ID : SB23.4312**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
contribution

Candidate Name

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 25    | / | 2015        |

**Transaction ID : SB23.4313**

Amount of Each Disbursement this Period

|          |
|----------|
| 10000.00 |
|----------|

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

15000.00

15000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

|                              |                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 24  | <input type="checkbox"/> 25            | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**Fightin' Ninth Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Nancy Dye**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 17    |   | 2015        |

Mailing Address 3535 Franklin Rd SW A-2

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Roanoke | VA    | 24014    |

**Transaction ID : SB29.4304**Purpose of Disbursement  
non-federal contribution

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

|         |
|---------|
| 2000.00 |
|---------|

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Suetterlein for Senate**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 17    |   | 2015        |

Mailing Address PO Box 20237

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Roanoke | VA    | 24018    |

**Transaction ID : SB29.4302**Purpose of Disbursement  
non-federal contribution

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

|         |
|---------|
| 2000.00 |
|---------|

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|      |       |          |

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

|  |
|--|
|  |
|--|

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

|         |
|---------|
| 4000.00 |
|---------|

**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 4000.00 |
|---------|